

2104.

Restaurant Licenses – Guidelines and Application

If you are interested in obtaining a Restaurant liquor license in Newfoundland and Labrador please use the following as a **guideline** of the requirements. *Please note: other agencies or departments may require information further to that which is listed below.*

agc	ncies of departments may require information further to that which is listed below.	
Gı	uidelines / Requirements	✓
Ne	wfoundland Labrador Liquor Corporation (NLC) License Requirements	
•	Completed application for Liquor Establishment license (see attached)	
•	Completed Personal Data Sheets (enclosed) for each shareholder, director and/or officer who is in charge of the premises	
•	Current Certificate of Conduct for each shareholder, director and/or officer who is in charge of the premises	
•	Written Municipal approval	Ī
•	Written approval from the Provincial Fire Commissioner's Office	
•	One set of floor plans, drawn to scale on paper no larger than 8.5" x 14", outlining the proposed licensed area, including dimensions of clearly identified rooms (including storage and the total number of fixtures in the men's and ladies' washrooms)	
•	A current signed copy of a lease or purchase agreement, or another document that verifies ownership and/or legal possession of the establishment (e.g., Property Tax Bill)	
•	Verification of posting of three public notices (see attached)	
•	Copies of three newspaper advertisements (see attached)	
•	If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6)	
•	Written approval from Buildings Accessibility and Fire & Life Safety (see Digital Government and Service NL section below)	
•	Verification of Food Establishment License (see Digital Government and Service NL section below)	
•	Once all information is collected, a pre-licensing inspection will be conducted	
Ot	her Agency Requirements	
Di	gital Government and Service NL	
an	e proposed establishment will need approvals from Buildings Accessibility and Fire d Life Safety. For more information, please visit ps://www.gov.nl.ca/dgsnl/licenses/building/ or call (709) 729-1038.	
A Food Establishment License is also required. Digital Government and Service NL conducts health inspections at all food establishments in the province. For more information, please visit https://www.gov.nl.ca/dgsnl/inspections/ or call (709) 729-		



ADVERTISING REQUIREMENT

In keeping with Section 34 of the *Liquor Control Act*, an advertising requirement must be fulfilled when an application is being made for a liquor establishment license:

Newspaper advertisements measuring at least 2" x 3" must appear in a local newspaper once a week for three consecutive weeks. Copies of the newspaper advertisements, along with the name of the newspaper and insertion dates, must be submitted with the application.

All newspaper advertisements must use the following wording:

Public Notice			
<insert company="" name="" of=""></insert>			
OPERATING AS	<insert establishment="" name="" of=""></insert>		
AT	<insert address,="" city="" exact="" location="" or="" street="" town=""></insert>		
IN THE PROVINCIAL DISTRICT OF	<insert district="" name="" of="" provincial=""></insert>		
IS APPLYING FOR A	Choose an item. to sell spirits, beers, and wines on premise.		
Resident and community feedback is an important part of the application process. If you have any concerns, or object to this application, please forward an email to licenseconcerns@nlliquor.com by 4:30 p.m. on licenseconcerns@nlliquor.com by 4:30 p.m. on			

<u>Public notices</u> measuring 8.5" x 11" must be posted in three conspicuous places within the specified Municipality or Electoral District (e.g., public bulletin boards, retail outlets, restaurants), in proximity to the proposed site, for three consecutive weeks. After the expiration of the three weeks, officials of the premises on which the notices were posted must sign the back of the notices as verification of posting.

Please use the Public Notice template attached for the applicable locations.

Please note that advertisements are valid for six months from the date of the last publication. If the six month period lapses, the applicant is required to re-advertise.



PUBLIC NOTICE

$\pmb{AT} \dots \dots \dots \dots \dots \dots$	
IN THE PROVINCIAL DISTRICT OF $\ \ . \ \ .$	
IS APPLYING FOR A	
	to sell spirits, beers, and wines on premise

Resident and community feedback is an important part of the application process.

If you have any concerns, or object to this application, please send an email to: licenseconcerns@nlliquor.com by 4:30 p.m. on:

- * A copy of the feedback may be provided to the license applicant.
- ** Please contact your municipality if you have questions or concerns about zoning bylaws and requirements.



☐ APPLICATION FOR LIQUOR ESTABLISHMENT LICENSE☐ APPLICATION FOR TRANSFER OF EXISTING LICENSE

☐ A	irport Establishment 🔲	Club	☐ Institution ☐	Lounge	■ Military Mess	□ Recreational Facility
□ R	estaurant 🔲 Restauran	t/Lounge	☐ Tourist Home	☐ Trans	sportation Service	
*Ple	ase note:					
An a	application fee of \$200 mi	ust accompany this compl	leted form.			
All I	icenses are subject to an	Annual Licensing Fee. Fe	or more details, ple	ease see th	e License Fee Sch	edule.
If ap	plying for transfer of licens	se, name under which Licen	se was last issued:			
					License No:	
Addı						
, taa.						
					_ Pnone:	
	T ONE					
ТО	BE COMPLETED BY ALL	APPLICANTS				
1.	Do you require a caterin	g license? ☐ Yes ☐ N	0			
2.	Applicant Information:					
	Name:					
	Surn	ame			Given Names	
	Address:					
	Phone:	Mobile	:		Fax:	
	Email:					
3.	Establishment Information	on:				
	(a) Business name of e	establishment:				
	(h) Physical Address	of Establishment (please cor	molete ALL FIFLING	3)		
	(b) <u>FifySidar</u> Address (A Establishment (piedse eel	implete ALL FILLIDO	')		
	Address:					
	City/Town:					
	Postal Code:					
	(c) Mailing Address of	Establishment (if different	from above)			
	Address:					
	City/Town:					
	Postal Code:					



(b) If a partnership, state separately each partner's investment and proportion of profit distribution:					
Name	Investment	% Profit-sharing ratio			
(a) If a corporation give:					
(c) If a corporation, give:					
Name					
•					
State whether applicant will occupy building as owner or tenant					
State whether applicant will occupy bu					
Has the applicant ever applied for a lice	cense for the sale of spirits, beers or wines er, director or shareholder of a Corporation	in Canada or elsewhere either as an indi ?			
Has the applicant ever applied for a lice	er, director or shareholder of a Corporation	in Canada or elsewhere either as an indi?			



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TO BE COMPLETED BY APPLICANTS APPLYING FOR AN INSTITUTION LICENSE OR MILITARY LICENSE

1.	Name of institution, Club, Branch, Lodge, Division or mess				
2.	Incorporated or chartered Date				
3.	Please provide separate list of executive including names, titles, addresses and telephone numbers.				
4.	State date on which institution or club commenced active operation				
PA	RT THREE				
то	BE COMPLETED BY APPLICANTS APPLYING FOR A TRANSPORTATION SERVICE LICENSE				
1.	Name and address of Company or Organization:				
2.	Indicate type of transport for which this application is being made:				
PA	RT FOUR				
TO BE COMPLETED BY ALL APPLICANTS					
	,of				
do :	do solemnly declare that:				
	I have knowledge of the matters herein deposed to;				
	 all information set forth in the attached application to the Newfoundland Labrador Liquor Corporation is true and correct in substance and in fact; and 				
	• I made this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.				
DATE	SIGNATURE OF APPLICANT				

Please send completed application to:

NEWFOUNDLAND LABRADOR LIQUOR CORPORATION

P.O. Box 8750, Stn. A St. John's, NL A1B 3V1 Attention: Regulatory Services

Telephone: (709) 724-1159 Fax: (709) 753-8625 Email: corporateservices@nlliquor.com



Date

PERSONAL DATA SHEET

Name of Establishment for which this report is submitted				
Location				
Surname	Given Name(s)			
Address				
Phone Number	Email			
Date of Birth	Place of Birth			
Place of Residence during past ten years				
Are you or any member of your family engaged, in any capacity, with the enforcement or administration of the <i>Liquor Control Act</i> and/or the <i>Liquor Corporation Act</i> ?				
☐ YES ☐ NO If yes, please give details				
Have there been any findings of guilt against you of an offense in Canada or the United States?				
☐ YES ☐ NO If yes, please attach a certified	copy of your criminal record.			
The Royal Canadian Mounted Police, the Royal Newfoundland Constabulary or any other law enforcement agency is hereby authorized to supply the Newfoundland Labrador Liquor Corporation with any information which the Board considers pertinent to my application for a license.				

Signature of Applicant